



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. **E422654**

CASE #	15-01159
LOCAL AGENCY CODING	0664
TOTAL # OF UNITS	02
OBJECT STRUCK	

INTERSTATE	<input type="checkbox"/>	CITY STREET	<input type="checkbox"/>	FIRE RESULTED	<input type="checkbox"/>
STATE ROUTE	<input checked="" type="checkbox"/>	OTHER	<input type="checkbox"/>	STOLEN VEHICLE	<input type="checkbox"/>
COUNTY RD	<input type="checkbox"/>	PRIVATE WAY	<input type="checkbox"/>	HIT & RUN INVOLVED	<input type="checkbox"/>
TRIBAL RESERVATION					

DATE OF COLLISION	M 05 - D 07 - Y 2015	TIME (2400)	0808	COUNTY #	31	MILES		N	<input type="checkbox"/>	E	<input type="checkbox"/>	IN	<input checked="" type="checkbox"/>	CITY #	0664
								S	<input type="checkbox"/>	W	<input type="checkbox"/>	OF	<input type="checkbox"/>		

ON (PRIMARY TRAFFIC WAY)	INTERSECTION	<input type="checkbox"/>	NON-INTERSECTION	<input checked="" type="checkbox"/>
SR 204	BLOCK NO.	<input checked="" type="checkbox"/>	8000	
	MILE POST	<input type="checkbox"/>		

DISTANCE	500	00	MILES	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>	E	<input type="checkbox"/>	OF (REFERENCE OR CROSS STREET)	81 AV SE
			FEET	<input checked="" type="checkbox"/>	S	<input type="checkbox"/>	W	<input checked="" type="checkbox"/>		

UNIT 01	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL-CYCLE	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 4258706432
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LAST NAME	SMITH	FIRST NAME	JAMES	MIDDLE INITIAL	M
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STREET NEW ADDRESS	10914 WILLOW RD
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CITY	LAKE STEVENS	ST	WA	ZIP	982589554
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	SMITHJM570MG	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	07	-	07	-	1943
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES	
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LICENSE PLATE #	AF03794	STATE	WA	VIN#	JHLRD1860YS000139
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2000	MAKE	HOND	MODEL	CRV	STYLE	UT	VEHICLE TOWED	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. JAMES SMITH 10914 WILLOW RD LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	AMERICAN FAMILY 2334-0194-03-59-FPPA-WA
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VEHICLE LEGALLY STANDING	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITATION #		CHARGE	
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UNIT 02	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL-CYCLE	<input type="checkbox"/>	PEDESTRIAN	<input type="checkbox"/>	PROPERTY OWNER	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	D: 4154078874
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LAST NAME	TRAN	FIRST NAME	JENNIFER	MIDDLE INITIAL	T
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STREET NEW ADDRESS	25 LEDYARD ST
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CITY	SAN FRANCISCO	ST	CA	ZIP	941240000
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CDL	C	RESTRICTIONS	0, 1	ENDORSEMENTS	
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DRIVER'S LICENSE #	B7064793	STATE	CA	SEX	F	D.O.B.	MMDDYYYY	06	-	23	-	1978
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES	
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LICENSE PLATE #	ASB4013	STATE	WA	VIN#	1N4BL3AP8FC129646
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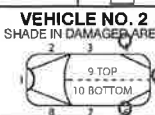
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2015	MAKE	NISS	MODEL	ALT	STYLE	4D	VEHICLE TOWED	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	TOP NOTCH	GOVT. VEHICLE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. JENNIFER TRAN 8519 16TH ST NE LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	USAA 02123 82 58U
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VEHICLE LEGALLY STANDING	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #		CHARGE	
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OFFICER'S NAME (PRINT)	KERRY BERNHARD	BADGE OR ID #	120	AGENCY	WA0311900
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STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E422654**

CASE # **15-01159**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		<b>SMITH TERESA A</b>																
ADDRESS & PHONE #		<b>10914 WILLOW RD LAKE STEVENS WA 98258 4258706433</b>																
SEX		<b>F</b>		D.O.B. MMDDYYYY		<b>10</b>		-		<b>25</b>		-		<b>1945</b>				
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	<b>1</b>	SEAT POS.	<b>3</b>	AIRBAG	<b>2</b>	RESTR.	<b>1</b>	EJECT	<b>1</b>	HELMET USE		INJURY CLASS	<b>7</b>	NATURE OF INJURIES <b>HEAD STRUCK WINDSHIELD</b>
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
SEX				D.O.B. MMDDYYYY				-				-						
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
SEX				D.O.B. MMDDYYYY				-				-						
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

**NARRATIVE**

On 5/7/2015 at approximately 0808 hours, Unit 1 was travelling westbound on SR 204 in the City of Lake Stevens behind Unit 2. Traffic was heavy and very slow with frequent stops. Unit 2 stopped for traffic. The driver of Unit 1 was distracted by a police car and unrelated collision on the side of the road. Unit 1 truck the back of Unit 2 causing damage to both vehicles.

Neither driver was injured. The passenger of Unit 1 suffered a head injury when her forehead struck the windshield. She was transported to the hospital by Aid personnel. Unit 1 was driven from the scene. Unit 2 was towed from the scene.

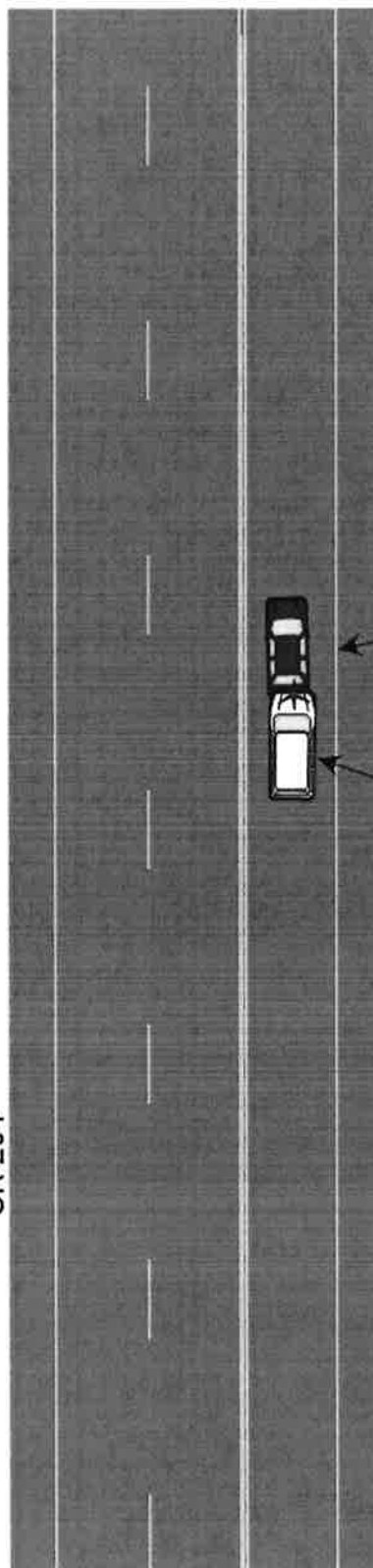
I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

<b>KERRY BERNHARD</b>		<b>05-07-15 02:47 PM</b>	
INVESTIGATING OFFICER'S SIGNATURE		DATED	
APPROVED BY		PLACE SIGNED	
<b>RON BROOKS 013</b>		<b>5/8/2015 3:08:32 AM</b>	
BADGE OR ID #	<b>120</b>	ORI #	<b>WA0311900</b>
TIME POLICE DISPATCHED		<b>8:08 AM</b>	
TIME POLICE ARRIVED		<b>8:08 AM</b>	



Not To Scale

SR 204



## CHECK ALL THAT APPLY:

- ☐ NON-IMPOUND/TOW  
☐ AAA or OTHER ROADSIDE ASSISTANCE  
☐ EVIDENCE  
☐ SEIZED UNDER RCW 69.50.505  
☒ IMPOUND ONLY  
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD  
☐ DWLS IMPOUND WITH \_\_\_\_ DAY HOLD  
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.  
☐ REGISTERED OWNER MAY REDEEM \_\_\_\_\_

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER/LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. THEY WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

## UNIFORM WASHINGTON STATE

TOW / IMPOUND  
AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

15-01159

## VEHICLE INFORMATION

VIN

1 N 4 B L 3 A P 8 F C 1 2 9 6 4 6

LICENSE <b>ASB4013</b>	STATE <b>WASHINGTON</b>	YEAR <b>2015</b>	MAKE <b>NISSAN</b>	MODEL <b>ALT</b>
<input type="checkbox"/> Report of Sale	MILEAGE <b>UNREADABLE</b>	<input type="checkbox"/> Digital	STYLE <b>SEDAN 4 DR</b>	COLOR <b>DARKBLUE</b>

DRIVER		REGISTERED OWNER		LEGAL OWNER
NAME (LAST, FIRST, MI) <b>TRAN, JENNIFER T</b>		NAME (LAST, FIRST, MI) <b>TRAN, JENNIFER</b>		NAME (LAST, FIRST, MI) <b>TRAN, JENNIFER</b>
STREET ADDRESS <b>25 LEDYARD ST</b>		STREET ADDRESS <b>8519 16TH ST NE</b>		STREET ADDRESS <b>8519 16TH ST NE</b>
CITY, STATE, ZIP CODE <b>SAN FRANCISCO, CA 941240000</b>		CITY, STATE, ZIP CODE <b>LAKE STEVENS, WA 98258</b>		CITY, STATE, ZIP CODE <b>LAKE STEVENS, WA 98258</b>
PHONE <b>(415)407-8874</b>	DOB	PHONE	PHONE	

## AUTHORIZATION AND RECEIPT

ON 5/7/2015 AT 08:56 PURSUANT TO RCW 46.55.085 / 113 AND HAVING PERSONALLY INVENTORIED THE ITEMS  
(DATE) (24 HOURS)

IN THE DESCRIBED VEHICLE, I AUTHORIZED TOP NOTCH 0  
(TOWING FIRM) (DOL TRUCK NO.)

DRIVEN BY 0 TO REMOVE THIS VEHICLE FROM 8000 SR 204/81 AV SE  
(DRIVER'S PRINTED FIRST AND LAST NAME) (LOCATION)

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input checked="" type="checkbox"/> [ 1 ] KEYS <input type="checkbox"/> LOCKED TRUNK <input type="checkbox"/> LOCKED GLOVE BOX <input type="checkbox"/> LOCKED CENTER CONSOLE <input type="checkbox"/> AUTO STEREO <input type="checkbox"/> [ ] DISC(S) <input type="checkbox"/> HANDS FREE DEVICE <input type="checkbox"/> GPS <input type="checkbox"/> RADAR / LIDAR DETECTOR <input type="checkbox"/> SPARE TIRE <input type="checkbox"/> JACK <input type="checkbox"/> CHAINS <input type="checkbox"/> OTHER _____	<input type="checkbox"/> FRONT <input type="checkbox"/> R FRONT <input type="checkbox"/> R SIDE <input checked="" type="checkbox"/> R REAR <input type="checkbox"/> L FRONT <input type="checkbox"/> L SIDE <input checked="" type="checkbox"/> L REAR <input checked="" type="checkbox"/> REAR <input type="checkbox"/> TOP <input type="checkbox"/> UNDERCARRIAGE <input type="checkbox"/> OTHER _____		

## INVENTORY

## NARRATIVE OR DIAGRAM

(List reasons(s) for impound.)

damaged in collision

☒ I PROVIDED A COPY OF THIS TOW / IMPOUND REPORT TO THE TOWING FIRM'S OPERATOR WHO TOOK POSSESSION OF THE VEHICLE.

☒ I PROVIDED A COPY OF THIS TOW / IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE TO THE DRIVER OF THIS VEHICLE.
 ☐ THE VEHICLE WAS ABANDONED - A COPY OF THE TOW / IMPOUND REPORT WAS LEFT WITH THE VEHICLE.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT (RCW 9A.72.085), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

OFFICER'S ELECTRONIC  
SIGNATURE

Kerry Bernhard

SNOHOMISH, WA

120

Lake Stevens PD

COUNTY, WA

BADGE NO.

AGENCY

LAKE STEVENS POLICE EVIDENCE UNIT	Primary Officer/Badge Number <i>K. BERHARD #120</i>	Case Number <i>15-0458 01159</i>
Type of Crime: Felony / Misdemeanor (Circle)	Type of Case: <i>ACCIDENT</i>	Date/Time: <i>5/7/15 1235</i>

Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING

\*Evi will be held until court dispo or when the Statute of Limitations has expired  
\*Found and Sfgk will be held for 60 days or 60 days past owner notification

Case # 15-0459

Item # <i>1651</i> Action # <i>3</i>	Item <i>Photo CD</i>	Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber		(Further Description)				
	Serial #	Where Found	Weight of Narcotic				
Owner's Name <i>LSPD</i>		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions <i>#120</i>							

Item #	Item	Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber		(Further Description)				
	Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions							

Item #	Item	Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber		(Further Description)				
	Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions							

Item #	Item	Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber		(Further Description)				
	Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions							

Item #	Item	Brand Name		Storage Location	Disposition		
	Brand/Model/Caliber		(Further Description)				
	Serial #	Where Found	Weight of Narcotic				
Owner's Name		Address	City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions							

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING:
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File

Incident History for: #SS15008798 Xref: #AG15001270

Case Numbers: \$SS15001159

Entered 05/07/15 08:08:58 BY SPDP17 SP0326

Dispatched 05/07/15 08:08:58 BY SPDP17 SP0326

Enroute 05/07/15 08:08:58

Onscene 05/07/15 08:08:58

Closed 05/07/15 08:53:12

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 2 Dispo: H

Police BLK: SS003 Fire BLK: AG1517 Map Page: 397C-1 Group: SS1 Beat: Src

Loc: 81 AV SE/SR 204 , LKS (V)

Loc Info:

Name: Addr: Phone:

/0808	(SP0326)	\$OUTSRV		, NO MORE INFORMATION
/0808		DISPOS	19D1	#SS120 BERNHARD, OFFICER (KERRY)
				, NO MORE INFORMATION
/0809		MISC	19D1	, NON INJ NON BLKING
/0812		CHANGE		LOC: 81/SR 204 --> 81 AV SE/SR 204 , LKS,
				BLK: --> SS003
/0813		\$CROSS		#AG15001270
/0824	(SS120 )	*ASNCAS	19D1	\$SS15001159
/0834	(SP0326)	MISC	19D1	, TOW PC 4 RND
/0834		ROTRQ	19D1	TOW 5705 LKS TOP NOTCH TOWING
				3605688877
/0835		MISC	19D1	, TOP NOTCH ER
/0842		MISC	19D1	, ONE DETND
/0853		CLEAR	19D1	D/H
/0853		CLOSE	19D1	